Evaluating a Health Information Resource in a Health System

Wendy F. Cohn, PhD¹, Laura H. Einbinder, MBA¹, Elaine Attridge, MLS², Jonathan Lord, MLS²

¹ Dept. of Health Evaluation Sciences, University of Virginia School of Medicine
² Claude Moore Health Sciences Library

Background

In an effort to offer the broadest scope of quality information resources, libraries are often faced with decisions related to the sources they provide based on the quality and cost of each resource. However, there lacks a framework to evaluate these resources to maximize the value of services offered to library users. The Claude Moore Health Sciences Library collaborated with the Department of Health Evaluation Sciences to undertake a comprehensive evaluation project to begin to establish such a framework. The long term goals are to: 1) determine cost effectiveness of services provided on an ongoing basis to provide objective basis for pursuing or renewing licenses, 2) evaluate licensed health care information services/databases under consideration and 3) create a process for ongoing evaluation. This abstract reports the results of the first demonstration evaluation of an information resource, MDConsult, as a model for future evaluation studies in a library setting.

Methods

An evaluation framework was developed to provide answers to questions related to the usage, costs and users' satisfaction. Multiple data collection strategies were utilized to answer each question.

Existing data that consisted of registration data and usage patterns for a six week period was supplied by MDConsult.

A web-based anonymous survey was developed to better understand usage by professional role, user satisfaction and perceived value. The survey was sent to all help desk users in the HSC. No incentives were offered; no follow-up was conducted for non-responders. Surveys were collected for a period of one week. A total of 388 individuals responded to the survey (232 MDConsult users; 156 non users).

Supplemental interviews were also conducted with key informants to augment usage and survey data.

Results

Registered MDConsult Users & Usage

Data supplied by MDConsult indicated that medical students are the largest user group followed by

physicians and residents. Physician users were most often in primary care (31%), with a significant number of users in neurology (6%), psychiatry (6%) and cardiology (3%). MDConsult is accessed an average of 130 times per day (range = 58-238). An average of 81 individual users logon to MDConsult per day (range = 18-142) MDConsult usage is heaviest during the week, with the number of licenses being exceeded at least once on 60% of those days

Cost

Data from January 1 - December 31, 2001 shows a cost of \$12.57 per user, \$0.87 per session, and \$0.05 per minute of use. Preliminary data from 2002 indicates that despite the increased licensing costs, cost per session remains at \$0.87.

Web survey results Access

Fifty-two percent of users report accessing MDConsult on a weekly basis. Few users (<5%) have been denied access to MDConsult due to simultaneous user restrictions more then 25% of the time; many users (>75%) of responders reported never being denied access or being denied access <5% of the time. MDConsult users access it from the office (60%), the library (44%), inpatient clinical areas (43%), outpatient clinical areas (32%), and from home (44%).

Satisfaction Overall, MDConsult users strongly agree or agree with the statements, "MDConsult is easy to use, is worth the time effort required to use it, has saved me time, is valuable to me, has helped me avoid clinical errors, has improved my patient care decisions, has contributed to my teaching, has contributed to my learning, and has helped me keep up to date."

Conclusions & Future Directions

Results indicate that MDConsult is a valuable resource used often in this medical setting. Medical students and primary care physicians use MDConsult most frequently. Additional licenses are not indicated due to the usage patterns.

Future efforts will include; additional evaluations of library information resources and modification of the evaluation framework.